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|  **C:\Documents and Settings\M. Aleem Ansari\My Documents\Downloads\ISP LOGO.png** | **INSTITUTE OF SOUTHERN PUNJAB****CLEARANCE PRO-FORMA-ZERO****APPLICATION FOR OFFICIAL TRANSCRIPT** |

**Student’s Name: (in Capital letter) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Father’s Name: (in Capital letter) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Note:** Spelling of Name & Father’s Name should be as per Matriculation Certificate

**Registration No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth:** (as per Matriculation certificate) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CNIC** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Class**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Specialization** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Sr. #** | **Department** | **Remarks** | **Signature** |
| 1 | Library |  |  |
| 2 | Technology Lab &Computer Lab |  |  |
| 3 | Cafeteria / Canteen |  |  |
| 4 | Parking Attendant |  |  |

**NOTE: -**

* **No person can apply & receive Transcript on behalf of another person.**
* **No person can receive Transcript without ISP Student Card / Original CNIC.**
* **Minimum CGPA for Bachelor 2.0 and for Master and above qualifications 2.50.**
* I have carefully read and checked all the particulars including my name, father’s name (spelling), date of birth as per matriculation certification & course title, marks, grade, GPA, CGPA and all other details as circulated from time to time through notifications by the Examination Department.
* I certify that all the contents of my particulars are correct and up-to my total satisfaction.
* I have deposited the transcript fee and copy of voucher is attached with this application.
* I undertake not to ask for any alteration afterwards.

Signature of Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Student Cell No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Application Received By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**P.T.O**

**Student Undertaking Regarding Studies:**

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| --- |
| **Course(s) Repeated after Fail (Please provide the detail below)** |
| **Sr. #** | **Name of Course(s)** | **Repeated with** |
| **Session (Spring/Fall)** | **Program** | **Semester** |
| 1 |   | Apr-Sep 20\_\_\_\_\_ / Oct-Mar 20\_\_\_\_\_ |   |   |
| 2 |   | Apr-Sep 20\_\_\_\_\_ / Oct-Mar 20\_\_\_\_\_ |   |   |
| 3 |   | Apr-Sep 20\_\_\_\_\_ / Oct-Mar 20\_\_\_\_\_ |   |   |
| 4 |   | Apr-Sep 20\_\_\_\_\_ / Oct-Mar 20\_\_\_\_\_ |   |   |
| 5 |   | Apr-Sep 20\_\_\_\_\_ / Oct-Mar 20\_\_\_\_\_ |   |   |
| 6 |   | Apr-Sep 20\_\_\_\_\_ / Oct-Mar 20\_\_\_\_\_ |   |   |
| 7 |   | Apr-Sep 20\_\_\_\_\_ / Oct-Mar 20\_\_\_\_\_ |   |   |
| **Course(s) Improved for GPA Improvement (Please provide the detail below)** |
| **Sr. #** | **Name of Course(s)** | **Improved with** |
| **Session (Spring/Fall)** | **Program** | **Semester** |
| 1 |   | Apr-Sep 20\_\_\_\_\_ / Oct-Mar 20\_\_\_\_\_ |   |   |
| 2 |   | Apr-Sep 20\_\_\_\_\_ / Oct-Mar 20\_\_\_\_\_ |   |   |
| 3 |   | Apr-Sep 20\_\_\_\_\_ / Oct-Mar 20\_\_\_\_\_ |   |   |
| 4 |   | Apr-Sep 20\_\_\_\_\_ / Oct-Mar 20\_\_\_\_\_ |   |   |
| 5 |   | Apr-Sep 20\_\_\_\_\_ / Oct-Mar 20\_\_\_\_\_ |   |   |
| **Rechecking of Course(s) (Please provide the detail below)** |
| **Sr. #** | **Name of Course(s)** | **Rechecking applied in**  |
| **Semester** | **Session (Spring / Fall)** |
| 1 |   |   | Apr-Sep 20\_\_\_\_ /Oct-Mar 20\_\_\_\_ |
| 2 |   |   | Apr-Sep 20\_\_\_\_ /Oct-Mar 20\_\_\_\_ |
| 3 |   |   | Apr-Sep 20\_\_\_\_ /Oct-Mar 20\_\_\_\_ |
| 4 |   |   | Apr-Sep 20\_\_\_\_ /Oct-Mar 20\_\_\_\_ |
| 5 |   |   | Apr-Sep 20\_\_\_\_ /Oct-Mar 20\_\_\_\_ |
| **Makeup Terminal Examination (Please provide the detail below)** |
| **Sr. #** | **Name of Course(s)** | **Appeared in Makeup Term. Exam. in** |
| **Semester** | **Session (Spring / Fall)** |
| 1 |   |   | Apr-Sep 20\_\_\_\_ /Oct-Mar 20\_\_\_\_ |
| 2 |   |   | Apr-Sep 20\_\_\_\_ /Oct-Mar 20\_\_\_\_ |
| 3 |   |   | Apr-Sep 20\_\_\_\_ /Oct-Mar 20\_\_\_\_ |
| **Semester(s) Repeated due to Drop (Please provide the detail below)** |
| **S #** | **Semester Number** | **Repeat in Session(Spring / Fall)** |
| 1 |   | April-September 20\_\_\_\_\_\_ OR October-March 20\_\_\_\_\_\_ |
| 2 |   | April-September 20\_\_\_\_\_\_ OR October-March 20\_\_\_\_\_\_ |
| 3 |   | April-September 20\_\_\_\_\_\_ OR October-March 20\_\_\_\_\_\_ |
| **Semester(s) Freezed (Please provide the detail below)** |
| **S #** | **Semester Number** | **Rejoined in Session(Spring / Fall)** |
| 1 |   | April-September 20\_\_\_\_\_\_ OR October-March 20\_\_\_\_\_\_ |
| 2 |   | April-September 20\_\_\_\_\_\_ OR October-March 20\_\_\_\_\_\_ |
|  |  |  |  |  |
| **Viva Voce Repeated after Fail:** | No. of Times Repeat:  |  |  |
|  |  |  |  |  |
| **Viva Voce Improved for GPA Improvement** | No. of Times Improved: |  |  |

